Minor Modification 1:
Pg. 6 – Changed sample type from composite to grab samples.

State Permit Number WPCC 3131D/76 NPDES Permit Number DE 0000299 Effective Date: November 1, 1999 Expiration Date: October 31, 2004 Minor Modification Effective October 1, 2003

# AUTHORIZATION TO DISCHARGE UNDER THE

### NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

### AND THE LAWS OF THE

# STATE OF DELAWARE

In compliance with the provisions of the Federal Water Pollution Control Act, as amended by the Clean Water Act of 1977 (33 U.S.C. 1251 et seq.) (hereinafter referred to as "the Act"), and pursuant to the provisions of  $7 \frac{Del. C}{Del. C}$ , 6003

Allen Family Foods, Inc. P.O. Box 63 Harbeson, DE 19951

is authorized to discharge from the facility (Point Sources 001and 002) located at

Route 5 Harbeson, DE

to receiving waters named

Beaverdam Creek

The effluent limitations, monitoring requirements and other permit conditions are set forth in Part I, II and III hereof.

R. Peder Hansen, P.E., Program Manager

Surface Water Discharges Section

Division of Water Resources

Department of Natural Resources and Environmental

Minor Modification 1: Changed Sample Type from composite to grab samples.

Part I State Permit Number WPCC 3131D/76 NPDES Permit Number DE 0000299 Page 6 of 19 Pages

Minor Modification 1 Effective Date: October 1, 2003

# C.2. EFFLUENT LIMITATIONS

During the period beginning November 1, 2003 and lasting through the expiration date, the permittee is authorized to discharge from point source 002 the quantity of quality of effluent specified below:

				Effluent Li	mitations			Monitoring Red	quirements
Parameter		Load			Co	ncentration			
	Daily Average	Daily Maximum	Units	Daily Average	Daily Maximum	Maximum Instantaneous	Units	Measurement Frequency	Sample Type
Flow <sup>1</sup>			mgd			=		Once per	Estimate
BOD₅	920	441	-	***		2.07 (6)	mg/L	quarter for two years,	Grab
Total Suspended Solids	##4	##:	311	**		**	mg/L	beginning in	Grab
pН			v		X =7		S.U.	the fourth year of the permit.	Grab
Oil & Grease	**:	854		<del>Hic</del>	000		mg/L	or the permit.	Grab
Total Phosphorus (as P)	<del>- 1</del>	1.5	-	-		TT-E	mg/L	1	Grab
Ammonia (as N)	**:	" +#S	184	<del>99</del> 5		220	mg/L		Grab
Total Kjeldahl Nitrogen (as N)	==	**	100	==		1 8455	mg/L		Grab
Ortho-phosphorus (as P)	-	4	144			Viii)	mg/L		Grab
Nitrate Nitrogen (as N)		(#Es	194	) <del>(1)</del>		:( <del>ee</del> >	mg/L		Grab
Nitrite Nitrogen (as N)	111	746)		4		( <del>110</del> )	mg/L		Grab
Enterococcus		T T	722	1945:	788		Col/100mL		Grab
						hese outfalls.			
	The discha	arges shall be f	ree from	floating soli	ds, sludge de	posits, debris, oil	and scum.		

All samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inches and at least 72 consecutive hours from the previously measurable (greater than 0.1 inch rainfall) storm event. All samples shall be taken within 30 minutes after discharge starts, or as soon thereafter as practicable. No sample shall be taken under circumstances that have the potential to endanger the person taking the sample.

<sup>1</sup> Report estimated flow at the time of storm water sampling.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

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_	유	8 O		(54-61)	ω	(46-53)		(38-45)				(54-61)		(46-53)		PARAMETER	-
SAI	FREQUENCY			QUALITY OR CONCENTRATION	OR CON	ALITAR		Only)	(4 Card Only)		NG	QUANTITY OR LOADING	QUAN	(3 Card Only)			
his fo	completing to	before (	NOTE: Read instructions before completing this form	NOTE: Rea	(30-31)	s-27) (28-29) (30-31)	(26-27)		(24-25)	(22-23)	(20-21)						
								] 70				FROM	i i		ware	Harbeson, Delaware	LOCATION
	NO DISCHARGE ☐	SCHA	NO DI		DAY	YEAR MO DAY	YEAR		DAY	MO	YEAR				(၂)	Delaware Route 5	FACILITY
	]		or <u>A</u>	Designator A		OD	MONITORING PERIOD	RING	NITO	M							
			piration	permit expiration		DISCHARGE NUMBER	DISCH			PERMIT NUMBER	RMIT	P			Delaware 19951	Harbeson, Delay	
	nit thru	pern	3 <sup>rd</sup> year of	Effective 3rd year of permit thru		002		_		0000299	E 00	0	į			P. O. Box 63	ADDRESS
						(17-19)				6)	(2-16)				ods, Inc.	Allens Family Fo	NAME

O DAY	YEAR MO	BER	DE NUMBER	VE AREA CODE	ZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNA					TYPED OR PRINTED
0							num 133	O COMPLETE. I AM AW IG FALSE INFORMAT E 18 U.S.C. § 1001 ANI to \$10,000 and/or maxi	IN IS TRUE, ACCURATE AND INALTIES FOR SUBMITTIN AND IMPRISONMENT. SEE fatules may include lines up ears.)	BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include times up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	THAT THAT THAT US.C. § 1	
m	DATE	12.1	TELEPHONE	,			20A - 9A	ALLY EXAMINED AND ASED ON MY INQUIRY ING THE INFORMATIO	N THAT I HAVE PERSON JBMITTED HEREIN; AND BJ ESPONSIBLE FOR OBTAIN!	Y UNDER PENALTY OF LAI WITH THE INFORMATION SI DIVIDUALS IMMEDIATELY RI		NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Grab	01/90	*	mg/L	*		*	*	*	*	*	PERMIT REQUIREMENT	00610
				BC ,		*	*		*	*	SAMPLE MEASUREMENT	Ammonia (as N)
Grab	01/90	*	mg/L	*		*	*	*	*	*	PERMIT REQUIREMENT	00665
						*	*		*	*	SAMPLE MEASUREMENT	Total Phosphorus (as P)
Grab	01/90	*	mg/L	*		*	*	*	*	*	PERMIT REQUIREMENT	00556
						*	*		*	*	SAMPLE MEASUREMENT	Oil & Grease
Grab	01/90	*	s.u.	*		*	34	*	*	*	PERMIT REQUIREMENT	00400
						*	*		*	*	SAMPLE MEASUREMENT	На
Grab	01/90	*	mg/L	*		*	*	*	*	*	PERMIT REQUIREMENT	00530
						*	*		*	*	SAMPLE MEASUREMENT	Total Suspended Solids
Grab	01/90	*	mg/L	*		X-	*	*	*	*	PERMIT REQUIREMENT	00310
						*	*		*	*	SAMPLE MEASUREMENT	BOD <sub>5</sub>
Est.	01/90	*	*	*			*	MGD	*	*	PERMIT REQUIREMENT	50050
				*		*	*				SAMPLE MEASUREMENT	Flow
(69-70)	ANALYSIS	ÉS-ES	STINU	MAXIMUM	MA	AVERAGE	MINIMUM	STINU	MAXIMUM	AVERAGE		(32-37)
SAMPLE TYPE	OF OF	ĕ.		(54-61)	CONCENTA (5)	QUALITY OR CONCENTRATION (46-53) (54-61)	(4 Card Only) (38-45)	(4 Ca	QUANTITY OR LOADING (54-61)	(3 Card Only) QU, (46-53)		PARAMETER
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

# NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

NAME Allens Family Foods, Inc.	ods, Inc.	1		(2-16)		(17-19)					
	vare 19951	1 1 1 1	PERN	PERMIT NUMBER		DISCHARGE NUMBER	Effective 3" Year of permit thru	s <sup>re</sup> year or oiration	r perr	nit thru	
ĺ	         			M	MONITORING	PERIOD	Designator A	Ϋ́A		]	
LOCATION Harbeson, Delaware	vare — — —		FROM	YEAR MO	DAY	YEAR MO DAY			ISCHA	NO DISCHARGE ∐	
				(20-21) (22-23)	(24-25)	(26-27) (28-29) (30-31)	NOTE: Rea	NOTE: Read instructions before completing this form.	before	completing th	is form.
PARAMETER		(3 Card Only) QL (46-53)	QUANTITY OR LOADING (54-61)	G	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)	NCENTRATION (54-61)		N O	FREQUENCY OF	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MUMINIM	AVERAGE	MAXIMUM	STINU	(8) EX	ANALYSIS (64-68)	(69-70)
Ortho Phosphorus (as P)	SAMPLE MEASUREMENT	*	*		*	*					
00671	PERMIT REQUIREMENT	٠	*	*	*	*	*	mg/L	٠	01/90	Grab
Nitrate Nitrogen (as N)	SAMPLE MEASUREMENT	*	*		*	*					
00620	PERMIT REQUIREMENT	ж-	*	*	*	*	*	mg/L	*	01/90	Grab
Nitrite Nitrogen (as N)	SAMPLE MEASUREMENT	*	*		*	(* <b>#</b> 6)					
00615	PERMIT REQUIREMENT	*	*	*	*	*	*	mg/L	*	01/90	Grab
Enterococcus	SAMPLE MEASUREMENT	*	*		*	*		Col./			
31639	PERMIT REQUIREMENT	*		*	*	*	х-	100 mL	*	01/90	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		UNDER PENALTY OF LA	W THAT I HAVE PERSO SUBMITTED HEREIN; AND RESPONSIBLE FOR OBTA	NALLY EXAMINE BASED ON MY II	NOUIRY OF			TELEPHONE		DATE	TE
	THAT THE INCLUDING U.S.C. § 11 imprisonme	BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Provides under these statutes may include these to 10.00 and/or maximum imprisonment of between 6 months and 5 years.)	ON IS TRUE, ACCURATE A ENALTIES FOR SUBMITI E AND IMPRISONMENT. S statutes may include lines u years.)	ND COMPLETE. I TNG FALSE INF EE 18 U.S.C. § 10 p to \$10,000 and/	AM AWARE ORMATION, OCT AND 33 OF maximum						
TYPED OR PRINTED					S	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	4	AREA NUN	NUMBER	YEAR N	MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)